

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Report November 19, 2018

Auditor Information

Name: Barbara Jo Denison	Email: [REDACTED]
Company Name: Shamrock Consulting, LLC	
Mailing Address: [REDACTED]	City, State, Zip: [REDACTED]
Telephone: [REDACTED]	Date of Facility Visit: [REDACTED]

Agency Information

Name of Agency: The GEO Group, Inc.		Governing Authority or Parent Agency (If Applicable): N/A	
Physical Address: One Park Place, Suite 700 621 Northwest 53rd Street		City, State, Zip: Boca Raton, Florida 33487	
Mailing Address: SAA		City, State, Zip: SAA	
Telephone: 661-999-5827		Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
The Agency Is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted to GEO's care.

Agency Website with PREA Information: www.geogroup.com/PREA (Social Responsibility Section)

Agency Chief Executive Officer

Name: George C. Zoley	Title: Chairman of the Board, CEO and Founder
Email: [REDACTED]	Telephone: [REDACTED]

Agency-Wide PREA Coordinator

Name: Phebia L. Moreland	Title: Director, Contract Compliance, PREA Coordinator
Email: [REDACTED]	Telephone: [REDACTED]
PREA Coordinator Reports to: Daniel Ragsdale, Executive Vice President, Contract Compliance	Number of Compliance Managers who report to the PREA Coordinator 111

Facility Information

Name of Facility: Arizona State Prison Complex – Kingman (ASPC – Kingman)			
Physical Address: 4626 W. English Drive, Golden Valley, AZ 86402			
Mailing Address (if different than above): PO Box 3939, Kingman, AZ 86402			
Telephone Number: 928-565-2460, ext. 2115			
The Facility Is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Facility Mission: In partnership with our Corporate Office and our customer, Arizona State Prison-Kingman will provide a meaningful public service by provided the highest quality security, basic education programs, substance abuse counseling, mental health counseling, and job seeking skills to prepare offenders for release and reintegration into our communities.			
Facility Website with PREA Information: www.azcorrections.gov and www.geogroup.com/PREA (Social Responsibility Section)			

Warden/Superintendent

Name: Jeff Wrigley	Title: Warden
Email: [REDACTED]	Telephone: [REDACTED]

Facility PREA Compliance Manager

Name: [REDACTED]	Title: Compliance Administrator
Email: [REDACTED]	Telephone: [REDACTED]

Facility Health Service Administrator

Name: [REDACTED]	Title: Health Service Administrator (HSA)
Email: [REDACTED]	Telephone: [REDACTED]

Facility Characteristics			
Designated Facility Capacity: Huachuca 1578 Cerbat 2080		Current Population of Facility: Huachuca – 1518 Cerbat - 1823	
Number of inmates admitted to facility during the past 12 months			2414 (for both units)
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			2414 (for both units)
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			2414 (for both units)
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			0
Age Range of Population:	Youthful Inmates Under 18: N/A	Adults: Huachuca – 22-79 Cerbat – 21-72	
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> NA	
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			Huachuca - 5 years Cerbat - 20 months
Facility security level/inmate custody levels:			Huachuca – Medium Cerbat - Minimum
Number of staff currently employed by the facility who may have contact with inmates:			618
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			150
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			344
Physical Plant			
Number of Buildings: Huachuca – 9 Cerbat - 18		Number of Single Cell Housing Units: Huachuca – 1 Cerbat - 1	
Number of Multiple Occupancy Cell Housing Units:		Huachuca - 1	
Number of Open Bay/Dorm Housing Units:		Huachuca – 5 Cerbat - 10	
Number of Segregation Cells (Administrative and Disciplinary):		Huachuca – 74 Cerbat - 80	
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):			
Camera footage is recorded and monitored in control centers. DVR's retain data for up to 60 days.			
Medical			
Type of Medical Facility:		24/7 onsite medical care	
Forensic sexual assault medical exams are conducted at:		Kingman Aid to Abused People	
Other			

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	Contractors 85 Volunteers 44
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	111

Audit Findings

Audit Narrative

The PREA on-site audit of the Arizona State Prison Complex-Kingman (ASPC-Kingman) was conducted March 5-9, 2018, by this Department of Justice (DOJ) Certified PREA Auditor, Barbara Jo Denison, with the assistance of Rodney Bivens, DOJ Certified PREA Auditor. Facility notices in both English and Spanish were forwarded to the agency's PREA Coordinator to be posted at the facility six weeks prior to the onsite visit. These notices were found to be posted in numerous locations throughout the facility. There was no inmate correspondence received from ASPC-Kingman.

Pre-audit preparation included a thorough review of all policies, procedures, training curriculums, Pre-Audit Questionnaire and supporting PREA-related documentation provided by the facility to demonstrate compliance to the PREA standards. Questions throughout the review period were answered by [REDACTED], Compliance Administrator who is designated as the Complex PREA Compliance Manager and [REDACTED], Assistant Deputy Warden (ADW) at the Huachuca unit, and [REDACTED], Assistant Deputy Warden at the Cerbat unit, who are designated as the PREA Compliance Managers of their respective units.

The GEO Group, Inc. and ASPC-Kingman renewed a Memorandum of Understanding (MOU) on October 12, 2017, with the Kingman Aid to Abused People (KAAP), a community agency that provides emotional support services to inmate victims of sexual abuse. Prior to the audit date, the KAAP Representative was contacted to confirm and review the terms of the MOU. Inmate victims of sexual abuse are transported to KAAP where there are two contracted SANE nurses on-call 24-hours a day to perform forensic exams. Victim advocates are provided to accompany the victim throughout the forensic exam process, as requested by the inmate victim. Nurses provide victims with detailed instructions for follow-up with facility medical staff within 24 hours for follow-up labs and prescriptions for prophylactics. KAAP Counselors go to ASPC-Kingman to provide follow-up victim services to ASPC-Kingman inmates, providing them with recommendations for resources available to victims and provide education.

On the first day of the audit, an entrance meeting regarding the audit schedule and audit process was conducted with the following people attending:

- Jeff Wrigley, Warden
- [REDACTED], Deputy Warden of Operations
- [REDACTED], Assistant Warden of Finance
- [REDACTED], Deputy Warden – Huachuca Unit
- [REDACTED], Deputy Warden – Cerbat Unit
- [REDACTED], Compliance Administrator/Complex PREA Compliance Manager
- [REDACTED], ADW/PREA Compliance Manager - Huachuca Unit
- [REDACTED], ADW/PREA Compliance Manager – Cerbat Unit
- [REDACTED], Chief of Security – Huachuca Unit
- [REDACTED], Chief of Security – Cerbat Unit
- [REDACTED], Programs Director
- [REDACTED], Executive Assistant
- Phebia Moreland, Director Contract Compliance, PREA Coordinator

Rodney Bivens, DOJ Certified PREA Auditor

ASPC-Kingman consists of three units; a Complex Unit, the Huachuca Unit and the Cerbat Unit. Following the entrance meeting, the Complex Unit was toured with Jeff Wrigley, Warden; [REDACTED], Complex PREA Compliance Manager; [REDACTED], Deputy Warden of Operations; Phebia Moreland, Director Contract Compliance, PREA Coordinator; and Rodney Bivens, DOJ Certified Auditor accompanying me on the tour.

The Huachuca Unit was also toured on the first day of the audit with Jeff Wrigley, Warden; [REDACTED], Deputy Warden – Huachuca Unit; [REDACTED], Complex PREA Manager; [REDACTED], ADW/PREA Compliance Manager – Huachuca Unit; [REDACTED], Chief of Security – Huachuca Unit; [REDACTED], Correctional Programs Supervisor – Huachuca Unit; Phebia Moreland, Director Contract Compliance, PREA Coordinator; and Rodney Bivens, DOJ Certified PREA Auditor, accompanying me on the tour.

On the second day of the audit, the Cerbat Unit was toured with the following people accompanying me on the tour: Jeff Wrigley, Warden; [REDACTED], Deputy Warden – Cerbat Unit; [REDACTED], Complex PREA Compliance Manager; [REDACTED], ADW/PREA Compliance Manager – Cerbat Unit; [REDACTED], Chief of Security – Cerbat Unit; Phebia Moreland, Director Contract Compliance, PREA Coordinator; and Rodney Bivens, DOJ Certified PREA Auditor.

During the tours, the location of cameras and mirrors, room layout including shower/toilet areas, placement of PREA posters and information was observed. PREA posters in both English and Spanish were posted throughout the facility in all living and common areas throughout the Huachuca and Cerbat units. *Third Party Reporting* posters were found posted in various locations throughout the Complex Unit. The auditors spoke informally to inmates and staff questioning them about their overall knowledge of the agency's zero-tolerance policy and methods of reporting PREA allegations. A total of 28 inmates and 27 staff were informally interviewed at the Huachuca Unit and 26 inmates and 24 staff at the Cerbat Unit. Inmates and staff interviewed were cooperative and knowledgeable with appropriate responses to PREA-related questions asked of them.

It was noted during the tour of the Huachuca Unit in the double bunk area in the back of the general population pods there appeared to be a blind spot. Each pod has four cameras and in review of the camera monitors, even when the camera view was zoomed in, this area could not be clearly captured by the cameras. During security staff interviews, staff solidified the need for more visibility in these blind areas. A recommendation was made that mirrors be added to the far back corner above the last few bunks to aid staff in the supervision of inmates in this area. The facility was receptive to the recommendation and plans are in place to purchase and install mirrors in all general population pods at the Huachuca Unit, a few each quarter as budget allows.

Inmate telephones are in each housing unit with the PREA hotline number (1-9-7732) stenciled on the wall above the telephones. During the tours of both units, two calls were made to the hotline number in different pods of each unit to ensure the number was accessible to inmates. Calls to this number are forwarded to the ADC Inspector General's office. Whenever an inmate picks up the phone to make any call, the inmate is reminded of the steps he must take to access the PREA hotline.

Posted instructions on bulletin boards in housing areas, both English and Spanish, on how to access the PREA hotline were found to instruct the inmates to dial "8" and then 7732. The Auditor 3, PREA

Coordinator of the Inspector General Bureau was informed of the error on the posting. The auditors and the facility were informed that this posting, which is Attachment B of ADC's Department Order (DO) #125, has been recently edited. The facility printed the edited attachment and replaced the postings in all locations.

Inmates are also informed in Attachment A of DO #125, which is posted in both English and Spanish in various locations throughout the facility, that they can contact the ADC Inspector General Bureau by writing to them at 801 South 16th Street, Phoenix, AZ 85034.

One inmate at the Cerbat Unit reported during the unit tour that he called the PREA hotline on December 16, 2017 and reported a PREA allegation concerning a strip search and to date he has not heard anything back about his call. The Auditor 3, PREA Coordinator of the Inspector General Bureau was notified. She looked into his complaint and found there was no recordings of any calls received from the ASPC-Kingman facility on that specific date or at any time by this inmate.

On the first day of the audit, the facility provided inmate housing rosters and lists of inmates with special designations. From these lists, inmates from both units were selected to be formally interviewed. The random sample included inmates selected from all living areas at both facilities and included inmates with special designations. The population on the first day of the audit was 1518 at the Huachuca Unit and 1823 at the Cerbat Unit. The following is a breakdown of inmate interviews conducted:

Huachua Unit:

Total # of Inmates Interviewed:	36
Inmates with Special Designations:	
Risk of Victimization:	1
Low Reading Skills:	1
Blind:	1 (Had designation of low reading skills, but found to be blind)
Low Vision:	1
Deaf:	1
Hard of Hearing:	1
Limited English Proficient:	4 (Spanish – interviewed with assistance of staff translators)
Gay:	2
Bisexual:	2
Transgender:	3

There were no inmates at the Huachuca Unit during the audit who self-disclosed being intersex and none that were identified to have cognitive deficits.

Cerbat Unit:

Total # of Inmates Interviewed:	38
Inmates with Special Designations:	
Risk of Victimization:	2
Low Reading Skills:	2
Limited English Proficient:	4 (Spanish – interviewed with assistance of staff translators)
Gay:	1
Transgender:	1

There were no inmates at the Cerbat Unit during the audit who self-disclosed being bisexual or intersex. There were none identified that were blind, had low vision, deaf, hard of hearing or with cognitive deficits.

The limited English proficient inmates from both units reported that they were shown the English video and not the Spanish. All but two limited English proficient inmates reported receiving written PREA information in Spanish. In a review of the files of the eight limited English proficient inmates interviewed, all but one inmate had signed the English *Inmate Acknowledgement of Receipt of Inmate Handbook, Disciplinary Handbook & PREA Pamphlet* instead of the Spanish form. There was no entry in the inmates' files to show they were presented information in Spanish. Due to this finding, the facility entered into a corrective action period for standard 115.16 and 115.33. Before the completion of this interim report, the facility completed corrective action and were found to be compliant with standards 115.16 and 115.33. See narratives of these standards for details.

The majority of inmates when asked if they were familiar with emotional support services available to them in the community responded they were not. Although information and the address of the Kingman Aide to Abused People (KAAP) is posted throughout the facility, it was recommended this information be reviewed during inmate orientation and be added to staff PREA training as well. The facility agreed with this recommendation.

Inmates interviewed from both facilities were familiar with the agency/facility's zero-tolerance policy against sexual abuse and sexual harassment and were able to articulate during interview the methods of reporting allegations of sexual abuse, sexual harassment and retaliation for reporting an allegation of sexual abuse or sexual harassment available to them. Inmates interviewed shared they feel safe from sexual abuse at this facility.

A random review of inmate records was conducted 25 at Huachuca Unit and 29 at Cerbat Unit. Inmate records are maintained in the Adult Inmate Management System (AIMS), which is a computerized system containing information regarding all inmates confined in the Arizona Department of Corrections. Copies of the *Inmate Acknowledgement of Receipt of Inmate Handbook, Disciplinary Handbook & PREA Pamphlet* that inmates sign upon intake are maintained in paper inmate files and were also reviewed.

In October 2017, the GEO PREA Coordinator and her team conducted a PREA technical assist at ASPC-Kingman. During that review, the team reviewed the Arizona protocols and compared them to the recent DOJ FAQ updates. Based on that review, specific protocols were developed and staff that are assigned responsibilities to accomplish these protocols were trained. This documented training and written protocols regarding standards 115.41 as well as 115.33, 115.63, 115.67 and 115.81 was provided for my review.

The risk-screening tool, which is screen DC91 in AIMS, was found to not allow screening staff to document their perception if they perceived an inmate to be gender non-conforming that is required pursuant to FAQ guidance from the Department of Justice dated 10/21/16.

The review of random inmate records also revealed the ADC PREA protocols do not require the facility to conduct 30-day reassessment screenings as required by 115.41 (f) and ADC DO #125.

Since the facility was unaware the AIMS system could track inmates that screened at risk of abusiveness; per instructions of the GEO PREA Coordinator and her team after the technical visit in October 2017, information on inmates at risk for victimization and abusiveness are being manually tracked at both units beginning January 1, 2018. There were three inmates from the Cerbat unit and seven from the Huachuca unit that were identified to be at risk for victimization. Inmates identified at risk for victimization were inmates assigned to ASPC-Kingman since January 1, 2018.

In review of ADC DO #125, inmate records, discussions with the Complex PREA Compliance Manager and the unit PREA Compliance Managers and in a review of ADC's *Overview of Screening Process – Permanent Units*, inmates that score at high risk are assessed to determine potential for inmate being at high risk for victimization or abusiveness. This assessment involves three levels of review. First reviewed by a Correctional Officer IV (COIV), then the Deputy Warden of the unit and the final review by the Offender Services Bureau (OBS). Documentation that this review process is being conducted was unable to be obtained while onsite. After review of the screening process and the onsite audit, several questions were posed as to how information from the scoring of the screening tool in AIMS was tracked and used to make appropriate housing, work and programming assignments to ensure the sexual safety of inmates. Information was requested from the Auditor 3, ADC PREA Coordinator for clarification of ADC screening procedures to better make a determination of compliance.

In review of the record review of transgender inmates, information in ADC DO #810, *Management of LGBTI Inmates*, and discussion with facility staff, inmates who self-disclose being transgender or intersex are to be reviewed by an ADC Transgender/Intersex Committee to determine programming and placement of these inmates. A review is also to be completed every six months thereafter. Documentation of reviews by the ADC Transgender/Intersex Committee were not found in review of screening information for the four transgender inmates housed at ASPC-Kingman during the audit. Additional information was requested from ADC and received on transgender inmates that were housed at both units during the onsite visit. Documentation of AIMS DI21 screens provided showed all were reviewed on dates after the onsite audit visit.

Through ongoing communication with the Auditor 3, ADC PREA Coordinator documentation was provided for additional clarification of the screening process. Guidance was sought from the PREA Resource Center and Department of Justice to assist in determining compliance with the ADC screening procedures. Attached is the response to my questions received on 5/11/18 from Michela Bowman from the PREA Resource Center in consultation with Joshua Delaney of the Department of Justice.

Based on the practices of the facility in regards to risk screening assessments and in review of ADC policies and required screening procedures, the facility was found to not meet the requirements of standards 115.41 and 115.42 and therefore entered into a 180-day corrective action period. The auditor is willing to discuss appropriate recommendations of steps to take to bring these standards into compliance with ADC or allow GEO (the contractor) to implement GEO protocols to bring these standards into compliance.

Prior to the onsite visit, both facilities provided a list of security and non-security staff that were scheduled to work on the audit days. From these lists, random security staff from each of the three shifts at each unit were selected to be interviewed. This selection included shift supervisors and line

staff. Thirty-four random security staff from the Huachuca Unit and 37 from the Cerbat Unit were interviewed. Specialist staff interviewed included 14 from the Huachuca Unit and 17 from the Cerbat Unit. Also interviewed were seven administrative staff who provide services to both the Huachuca and Cerbat units.

Non-security staff confirmed receiving PREA training in New Employee Orientation (NEO) and being required to complete online PREA training annually. Security staff confirmed receiving PREA training in Correctional Officer Training Academy (COTA) as a new hire and completing online PREA training annually. They also confirmed receiving training on cross-gender pat down searches and searches of transgender and intersex inmates annually in Block Training.

Staff interviewed were not aware the facility had a contract with Language Line Services to assist them in communicating with inmates that are limited English proficient. Based upon these findings from interviews with staff, this will be addressed in the corrective action plan for standard 115.16.

Staff interviewed were knowledgeable of their responsibilities of detecting, preventing, responding to and reporting sexual abuse and sexual harassment allegations. They knew how to respond if they learned a resident was in imminent danger of sexual abuse.

Human Resource files of employees and contractors were reviewed with the Human Resource Manager to determine compliance to criminal background check procedures. Fifteen employee files each from the Huachuca Unit and the Cerbat Unit were selected to be reviewed. Employee files for both units included those of five employees promoted and five employees hired in the past 12 months and five employees who have been employed for longer than 12 months. There were five contractor files reviewed for contractors assigned to the Huachuca Unit and four of contractors assigned to the Cerbat Unit. Records reviewed were found to be complete and organized.

The same files that were selected for review for compliance with criminal background check procedures were reviewed with the Training Lieutenant and the Training Clerk for compliance with PREA training requirements. Completion of PREA training is maintained electronically in Tracorp (ADC) and in the Learning Management System (LMS) (GEO). GEO's PREA Training Acknowledgement forms and ADC's *PREA Training Acknowledgement* rosters are signed for initial NEO and COTA classroom training. Annual online training is automatically entered in Tracorp upon completion and manually entered in LMS by the Training Clerk. All records reviewed were found to be well organized and complete. Records showed documentation of annual training on cross-gender pat searches and searches of transgender and Intersex inmates is being maintained in individual electronic training records in Tracorp and LMS.

ASPC-Kingman has 56 religious volunteers. The Senior Chaplain is responsible for maintaining volunteer files for both units. Random volunteer files were reviewed with the Senior Chaplain. Records reviewed were found to contain documentation of criminal background checks performed by ADC and documentation of annual volunteer training, which includes PREA training.

The Arizona Department of Corrections has a statewide Criminal Investigations Unit (CIU) that is responsible for investigating allegations of sexual abuse and sexual harassment at ASPC-Kingman and all ADC facilities. Investigative files were reviewed with the Complex PREA Manager and found to contain a brief written report provided by CIU at the conclusion of an investigation. In the 12 months preceding the audit, the facility received 13 PREA allegations that were investigated by CIU. The breakdown of those allegations are as follows:

Number Received	Description of Complaint	Investigative Results
6	Inmate-on-Inmate Sexual Abuse	5 – Unsubstantiated 1 – Unfounded
2	Inmate-on-Inmate Sexual Harassment	2 – Unsubstantiated
3	Staff-on-Inmates Sexual Abuse	3 – Unsubstantiated
2	Staff-on-Inmate Sexual Harassment	1 – Substantiated 1 - Unfounded

At the conclusion of the audit, an exit meeting was held to discuss the audit findings with the following people in attendance:

Jeff Wrigley, Warden
 ██████████, Deputy Warden of Operations
 ██████████, Assistant Deputy Warden – Huachuca Unit
 ██████████, Chief of Security – Huachuca Unit
 ██████████, Compliance Manager/Complex PREA Compliance Manager
 ██████████, Deputy Warden – Cerbat Unit
 ██████████, Assistant Deputy Warden – Cerbat Unit
 ██████████, Chief of Security – Cerbat Unit
 ██████████, Human Resource Manager
 ██████████, Training Lieutenant
 ██████████, Correctional Programs Supervisor – Cerbat Unit
 ██████████, Inmate Records Supervisor
 ██████████, Trinity Food Service Manager
 ██████████, OPR Investigator
 ██████████, Correctional Programs Supervisor – Huachuca Unit
 ██████████, Executive Assistant
 Phebia Moreland, Director Contract Compliance, PREA Coordinator
 Rodney Bivens, DOJ Certified PREA Auditor

During the exit meeting, the facility was complimented on the excellent cooperation prior to the audit and throughout the onsite visit. Although the facility could not be given final findings of the audit, observations were reviewed. Discussion was held on recommended corrective action to bring standards 115.16 and 115.33 into compliance. Also discussed were the findings on ADC mandated screening procedures as they apply to standards 115.41 and 115.42. The team was informed that continued guidance would be sought from ADC, the PREA Resource Center and the Department of Justice before making a determination of compliance to standards 115.41 and 115.42. The facility was informed of the process that would follow the onsite audit and GEO’s responsibility to publish the final report on their website.

Facility Characteristics

The Arizona State Prison Complex – Kingman (ASPC-Kingman) is located at 4626 W. English Drive, Golden Valley, Arizona. The facility is comprised of two units, the Huachuca Unit and the Cerbat Unit and a Complex Unit. The GEO Group Inc. assumed management of the ASPC-Kingman on December 1, 2015 and are contracted with the Arizona Department of Corrections to house adult male state offenders.

The Complex Unit is comprised of an Administration Building, a South Building and a North Building. The Administration Building contains the Warden's office, the Deputy Warden of Operations office, support staff offices and the Business and Human Resources offices. A Maintenance Building is also part of the Complex Unit.

The South Building has an Arizona Correctional Industries program where inmates construct Jim Glo trailers, a central laundry and a staff fitness center. The North Building is comprised of a transportation office, lock shop, mailroom, training center, fire safety office, inmate records office, contract compliance office and a warehouse.

The Huachuca Unit is a 1508-bed medium-security facility constructed in 2004. Approximately 80% of the population at the Huachuca Unit are sex offenders. The Huachuca Unit is comprised of an Administration Building, Building B, which is the Medical Building, Building C (central kitchen, 2 dining halls, a chemical control room and education classrooms), Building D (multipurpose room used for bands and religious services, education classrooms, braille program, and work-based education programs). The Huachuca Unit has a South Yard, North Yard and East Yard. There are five housing dorms separated by fencing with three recreation yards. A two-story control tower is in the center of the compound. Staff assigned to the control tower have a visual of all three recreation yards and can monitor cameras for the entire facility. Recreation yards have toilet areas with barriers that afford inmates privacy when toileting.

Dorms 1 and 2 form the South Yard. Dorm 1 has six pods with a total of 354 beds and Dorm 2 has four pods with 236 beds. Dorm 3 is the only dorm in the East Yard and it has six pods with 328 beds. Dorms 4 and 5 form the North Yard. Dorm 4 has six pods with 354 beds and Dorm 5 has four pods with 236 beds. Total general population beds at the Huachuca Unit is 1508. Dorm 5 contains two pods that form the Restricted Housing Unit, referred to as the Complex Detention Unit or CDU. One pods has 24 double bunks and the other has 25 single bunks. The CDU at Huachuca is used as an overflow for Cerbat inmates when needed. CDU cells have toilets and washbasins in the cells and there are seven individual showers in each pod with doors that allow inmates privacy while showering. There are 10 recreation cages and inmates are offered recreation one hour per day.

There is a control station in the center of each dorm where security staff assigned there monitor cameras and control doors. Glass windows in all pods give staff in the control station a visual of the surrounding pods.

Restrooms in the general population Dorms have five toilets, two urinals, seven showers and five washbasins in each pod. Shower curtains on individual showers ensure inmates privacy while showering. Partial block walls separate the toilets and urinals. The first toilet when entering the restroom area has a curtain attached at the height of the block partition that provides privacy when toileting.

The Cerbat Unit is 2000-bed minimum-security level facility constructed in 2010. The Unit is divided into two prison yards, each with 1000 beds. About 125 Cerbat inmates leave the facility each day to perform work at the complex or in the community.

The Cerbat Unit is made up of an Administration building with offices of administrative and clerical staff, a North Yard and an East Yard. The North Yard has five dorms numbered 1-5. Each dorm has an A side and a B-side with 100 single beds on each side and an inmate programs classroom and a barbershop in the back of the dorm. There are two cameras on each side of the dorm. An officers' desk at the front of each housing unit has camera monitors and the large open layout of the building allows security staff a visual of both the A and B-sides of the dorm when at the officers' desk. Large enclosed bulletin boards display PREA and other information.

Each dorm has 12 toilets, 12 urinals, 8 sinks and 20 showers. Four of the showers are designated for accessibility of disabled inmates. Like the Huachuca Unit, shower curtains on individual showers ensure inmates privacy while showering. Partial block walls separate the toilets and urinals. The first toilet when entering the restroom area has a curtain attached at the height of the block partition that provides privacy when toileting.

Also on the North Yard, a Programs Building 1 houses the Arizona Correctional Industries that manufactures eco-friendly Styrofoam blocks. Programs Building 2 – Side A has Wheels for the World program where wheelchairs are restored to be shipped in and out of the country. Side B of Programs Building 1 has a multipurpose room used for religious services and an intake area. The Intake area is a large area sectioned off into stations that makes the intake of a large number of inmates on any given day efficient. There is a North side dining hall and a programs hall with a library and education classrooms.

The East Yard of the Cerbat Unit has five dorms numbered 6-10. At the time of the audit, Dorm 9 was closed for renovations. Each dorm is configured exactly the same as the North Yard dorms. There is an East Side dining hall, a programs hall with a library and education classrooms, a medical building with an observation ward with 6-beds, and a property room.

A work based education programs where core safety, painting, carpentry, electrical, plumbing and HVAC are offered is housed in Programs Building 3 on the North Yard. A Programs Building 4 has a special events room on Side A of the building and a multipurpose room for religious services and musical bands on Side B.

There is a Complex Detention Unit (CDU) building on the East Yard of the Cerbat Unit. The CDU has a total of 80-single bed cells with an A and B-side. Toilets and washbasins are within the cells and there are five showers on each side. Inmates are seen for sick call and other medical needs in a medical room located in the CDU. There are 10 recreation cages and inmates are offered one hour per day for recreation.

A contract with Correct Care Solutions (CCS) provides 24 hours per day, seven days a week medical and mental health services. A contract with Trinity Food Services provides inmate meals. Between CCS and Trinity Food Services, the ASPC-Kingman has 75 contracted staff.

The Huachuca Unit and the Cerbat Unit operate on three eight-hour security shifts (0600-1400, 1400-2200 and 2200-0600). Security of the ASPC-Kingman inmates is by direct staff supervision. There are four formal counts and four informal counts in a 24-hour period. Upper level management staff conduct unannounced PREA rounds at a minimum of two rounds on each shift per month.

The Arizona State Prison Complex-Kingman's Mission Statement:

"In partnership with our Corporate Office and our customer, Arizona State Prison-Kingman will provide a meaningful public service by providing the highest quality security, basic education programs, substance abuse counseling, mental health counseling, and job seeking skills to prepare offenders for release and reintegration into our communities."

GEO's Mission Statement:

"GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted in GEO's care."

Summary of Audit Findings

Number of Standards Exceeded: 5

The facility was found to exceed in the requirements of standards 115.11, 115.13, 115.17, 115.31 and 115.88.

Number of Standards Met: 38

The facility was found to meet all the requirements of the following standards: 115.12; 115.14; 115.15; 115.16; 115.18; 115.21; 115.22; 115.32; 115.33; 115.34; 115.35; 115.43; 115.51; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.64; 115.65; 115.66; 115.67; 115.68; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.89; 115.401 and 115.403.

Number of Standards Not Met: 2

The facility was found to not meet the requirements for standards 115.41 and 115.42.

Summary of Corrective Action (if any)

Following the onsite audit, the facility entered into a corrective action period for standards 115.16, 115.33, 115.41 and 115.42. The facility provided documentation to prove compliance to standards 115.16 and 115.33 prior to the completion of the interim report. Details are provided in the narrative of those two standards of the corrective actions taken.

Following the on-site audit visit, the facility entered into a 180-day corrective action period for standards 115.41 and 115.42. The corrective action period ended on 11/14/18. The auditor's recommendations were for the Arizona Department of Corrections to revise its current risk screening and use of the screening information protocols to comply with the FAQ guidance for standards 115.41 and 115.42 or allow GEO to implement their protocols for 115.41 and 115.42 that comply with the FAQ guidance.

No documentation was provided to show corrective actions were taken; therefore, the requirements for standards 115.41 and 115.42 remain non-compliant. The Arizona Department of Corrections PREA Coordinator informed this auditor the Arizona Department of Corrections plans to appeal both non-compliant findings.

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? Yes No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

GEO policy 5.1.2-A is a written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct. The policy includes definitions of prohibited behaviors and sanctions imposed for those found to participate in these prohibited behaviors. GEO policy 5.1.2-A is very comprehensive and provides a thorough description of the agency's approach to reduce and prevent sexual abuse and sexual harassment of inmates and found to exceed 115.11 (a) of this standard.

The Arizona Department of Corrections (ADC) Department Order (DO), #125 is the zero-tolerance policy of the Arizona Department of Corrections and this facility. Pages 19 & 20 of DO #125 outlines the definitions of prohibited behaviors for inmates and staff. Due to contractual requirements between ADC and GEO, ADC policies are required to be followed at this facility.

GEO employs an upper level agency-wide PREA Coordinator as required by this standard. In interview at an earlier date, the PREA Coordinator stated that she has sufficient time and authority to develop, implement and oversee the agency's efforts to comply with the PREA standards in all of its facilities with the assistance of her entire PREA team. In review of the facility's Organizational Chart, ASPC-Kingman has designated a Complex PREA Manager who oversees PREA compliance for the entire complex. In addition, the Assistant Deputy Wardens at each unit are the designated PREA Managers for their respective units. In interview with the Complex PREA Manager and the PREA Compliance Managers from the Cerbat and Huachuca units, they all stated that they have sufficient time and authority to manage their PREA-related responsibilities.

The facility was found to exceed in subsection (b) of this standard. The facility not only has an agency-wide PREA Coordinator, but also has a PREA Division Coordinator and a PREA team with key responsibilities of assisting the PREA Coordinator with overseeing the agency's efforts of complying with the PREA standards. ASPC-Kingman also has a Complex PREA Manager and PREA Managers for each unit exceeding in the requirements of subsection (c) of this standard.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement

of inmates OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

GEO is a private provider and does not contract for the confinement of its inmates; therefore, this standard is not applicable to this facility.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration all components

of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?
 Yes No

- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes No NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on GEO policy 5.1.2-A, page 7, section C-1-a-e, the facility has developed, documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect inmates against sexual abuse. The staffing plan, developed using the general staffing pattern for a 3400-bed facility, was provided for review. ASPC-Kingman has a mandated minimum staffing plan and currently staffing levels exceeds the amount of required staffing. The ratio of security staff to inmates is 1:9 at the Cerbat Unit and 1:8 at the Huachuca Unit.

In interview with the Warden, he stated that in developing the staffing plan and assessing the need for video monitoring, the facility took into consideration generally accepted detention and correctional practices, any judicial findings of inadequacy, any findings of inadequacy from federal investigative agencies and internal or external oversight bodies, all components of the facility's physical plant, the composition of the inmate population, the number and placement of supervisory staff, programs occurring on a particular shift, any applicable state or local laws or regulations and the prevalence of substantiated and unsubstantiated incidents of sexual abuse.

A *PREA Annual Facility Assessment* is completed by the PREA Compliance Manager and forwarded to the PREA Coordinator, to include any deviations to the established staffing levels. The first *PREA Annual Facility Assessment* after GEO took ownership of ASPC-Kingman was completed on 10/13/16. In that assessment, it was noted that the facility had experienced a staffing shortage with as many as 100 vacant Correctional Officer positions at one time, but through the use of overtime, coverage was provided.

On July 19, 2017, there was a *Contract Change Order/Amendment* to the staffing plan that reduced two mental health worker positions and added an Assistant Director of Nurses and a Registered Nurse – CID/QA, as requested by GEO. In agreement with ADC and GEO, one Commissary Supervisor and four Commissary Clerks were also added.

The most recent *PREA Annual Facility Assessment* completed on 9/15/17, noted that the facility complies with the contractual facility staffing plan by utilizing overtime to cover mandatory posts. Both *PREA Annual Facility Assessments* showed that the facility continues to assess the adequacy of camera surveillance at both units. Camera surveillance system improvements were made and both units now have operating camera surveillance with better monitoring and recording capabilities.

Staffing reports are submitted to and monitored by the Arizona Department of Corrections every two weeks to ensure contract requirements are being met. The Chief of Security reviews the staffing roster on a daily basis. In interview with the Warden, he stated that he reviews staffing rosters weekly and that in the past 12 months there have been no deviations to the established staffing plan. The facility does and the ADC do an excellent job of monitoring the staffing plan and ensuring there are no deviations from the established staffing plan, exceeding in the requirements of this section of this standard.

ADC's DO #703, page 2, section 703.02, 1.1, state that Wardens, Deputy Wardens, Associate Deputy Wardens and supervisory staff will conduct and document inspections on all shifts to deter employee sexual abuse and sexual harassment. The Warden, Deputy Warden of Operations, the Deputy Wardens and Assistant Deputy Wardens of each unit perform unannounced PREA rounds at a minimum of twice each shift per month. These rounds are documented on the *ADC-Inspection/Tour Report (Form 703-1)* which were provided for review prior to the onsite visit and a random sample reviewed while onsite. Employees are prohibited from alerting other employees that these rounds are being conducted. Entries of these rounds are also found in the Correctional Services Log found in all dorms. The practice of these rounds being conducted was confirmed by interview with inmates and staff who reported numerous rounds on all shifts and upon review of the *ADC-Inspection/Tour Reports*. In review of documentation prior to the audit and during the audit, the facility was found to exceed in the requirements of this standard.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)
 Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Arizona State Prison Complex – Kingman houses adult male inmates only and does not house youthful inmates.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
 Yes No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) Yes No NA
- Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates?
 Yes No N/A

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO # 708 addresses inmate pat searches, strip searches, body cavity searches and the limits to cross gender viewing and searches. Cross-gender strip searches and cross-gender body cavity searches are prohibited except in exigent circumstances or when performed by a medical practitioner. A staff member of the same gender conduct pat searches and these searches are documented on a *Search Log Worksheet*. DO #708, page 8, section 1.7.1 states that staff members of the same gender perform strip searches and page 10, sections 1.2.1 & 1.2.1.1 addresses the policy on pat searches. DO #708, page 19, section 1.1.21 specifies searches of transgender and intersex inmates.

ASPC-Kingman houses male inmates only; therefore, sub-sections 115.15 (b) and 115.15 (c) of this standard are not applicable to this facility.

ASPC-Kingman has policies and procedures that allow inmates to shower, change clothes and toilet without female staff viewing them, except in exigent circumstances or when viewing is incidental to routine cell checks. Female staff are required to announce their presence when they enter housing units or any areas where inmates are likely to be showering, changing clothes or toileting. According to *Unit Specific Post Order 35 for Housing and Unit Security Officer*, officers are required to make an announcement at the beginning and end of each shift advising inmates that female staff will be working and visiting in the housing unit. This announcement is documented in the housing units *Correctional Service Journal*. ADC DO #704.05, page 5, sections 1.3 & 1.4 states that inmates are to be dressed appropriately at all times when out of their cell or cubicle or be subject to disciplinary action. Inmates are informed that female staff may work or visit their housing unit on notices posted in all housing areas.

DO #810, page 2, section 810.02, 1.2.4 addresses procedures for inmates who identify with being transgender and intersex. Staff are not to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined by conversation with the inmate or by a medical exam conducted in private by a medical practitioner.

All staff receive GEO's *Limits to Cross-Gender Viewing and Searches* training in pre-service and in annual in-service on how to conduct searches, including searches of transgender and intersex inmates in a professional and respectful manner. Security staff interviewed confirmed receiving this training and documentation of this training was found in the random review of staff training files.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,

and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? Yes No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? Yes No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? Yes No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ASPC-Kingman takes appropriate steps to ensure that inmates with disabilities and inmates that are limited English proficient have an opportunity to participate and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and harassment. ADC, DO #125, page 4, section 1.2 and DO #704, section 704.15, were used to verify compliance to this standard, along with interviews with inmates with disabilities and those that are limited English proficient.

A TTY is available for deaf inmates use and inmate phones have a button to increase the volume for inmates who are hard of hearing. All posted and written information is available in both English and Spanish. The agency does not use inmates as interpreters, readers of other types of inmate assistants.

Spanish speaking staff interpreters are provided to interpret for inmates that are Spanish speaking only. A contract with Language Line Services, Inc. provides translation services of any other languages. During interviews of staff, staff were unaware that the facility had a contract with Language Line Services. In discussion with the Complex PREA Compliance Manager, he said they have had the contract, but have never called Language Line Services to receive access. During the audit, the call was made and access was obtained.

Inmates with literacy problems or visual impairments will be provided oral translations of PREA training material. The NIC *Speaking Up: Discussing Prison Sexual Assault* DVD was thought to be available in both English and Spanish. The limited English proficient inmates interviewed from both units reported that they were shown the English DVD and not the Spanish. It was revealed that the Spanish version of the DVD was no longer functional. The PREA Coordinator was able to obtain a new DVD for the facility. All but two limited English proficient inmates reported receiving written PREA information in Spanish. In a review of the paper files of the eight limited English proficient inmates interviewed, all with the exception of one inmate had signed the English *Inmate Acknowledgement of Receipt of Inmate Handbook, Disciplinary Handbook & PREA Pamphlet* instead of the Spanish form. There was no entries in the inmates' paper or AIMS files to show they were presented information in Spanish. Due to

this finding, the facility entered into a corrective action period for standard 115.16. The recommended corrective action plan is as follows:

Recommended Corrective Action Plan :

In coordination with the PREA Coordinator and the facility, the facility will need to complete the following steps to achieve compliance to this standard:

1. The Warden would need to send a memo to all staff informing them of bilingual staff at both units and the shifts that they work and advising them of the availability of the language line and how to access the line if bilingual staff are not available for translation.
2. Language line posters in key staff areas need to be posted at both units.
3. Instructions that were provided during the technical assist visit in October 2017 on how to document the use of the language line in AIMS need to be reissued to staff and staff will need to sign that they have received these instructions.
4. All LEP inmates at both units need to be identified. Once identified, these inmates need to have a PREA retraining to include viewing the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD. Documentation of this retraining needs to be entered into AIMS with appropriate comments to include translator name or language line ID number if used.
5. After viewing the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD, inmates need to sign the Spanish *Inmate Acknowledgement of Receipt of Inmate Handbook, Disciplinary Handbook & PREA Pamphlet*.
6. The documentation of the steps 1-5 (list of identified LEP inmates at both units, the Warden's memo on the availability of the Language Line, copy of the Language Line Poster, signed Spanish *Inmate Acknowledgement of Receipt of Inmate Handbook, Disciplinary Handbook & PREA Pamphlet* forms and AIMS printouts) need to be forwarded to the PREA Coordinator who will forward the complete documentation to me for my review.

On 5/1/18, the GEO PREA Coordinator forwarded the requested information provided by the facility to prove compliance to this standard. There were 178 Cerbat inmates and 85 Huachuca inmates identified as Spanish speaking only. All identified at both units viewed the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD (Cerbat on 4/19/18 and Huachuca on 4/30/18). I was provided with the Warden's memo, training rosters with signatures of inmates who attended retraining, copies of all signed Spanish acknowledgement forms for both units and a random sample of AIMS screens showing entries of completion of this retraining noting staff translator used. Documentation provided also included a training roster of staff trained on PREA orientation and new arrivals screening procedures.

After review of the documentation provided, the facility was found to meet compliance to all of the requirements of this standard.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? Yes No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? Yes No
- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

GEO and ASPC-Kingman do not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer who may have contact with inmates, who has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community. ADC DO #125, pages 15 & 16, section 125.07 outlines the employment screening requirements.

ASPC-Kingman considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

Criminal background checks are completed before hiring any new employee or contractor. ADC performs ACIC/NCIC background checks and DPS checks on all potential employees. Additionally all GEO staff have a criminal background check conducted by Career Builder System (CBS). Applicants who answer on their application for employment that they have worked previously in a confinement setting, receive a PREA verification by CBS. During the conditional offer phase, applicants are asked to disclose any incidents of sexual abuse or sexual harassment either in an institutional setting or in the community.

For consideration for promotions or transfers, employees complete a *PREA Disclosure and Authorization Form Promotions – PREA Related Positions* and another ACIC/NCIC, a driver's license check and CBS, criminal background check are conducted. Employees have a continuing affirmative duty to disclose any sexual misconduct. Material omissions regarding sexual misconduct, or the provisions of materially false information, shall be grounds for termination. Annually *PREA Disclosure and Authorization Forms* are electronically signed.

Background checks for medical staff who are contracted by ADC through Correct Care Solutions (CCS) have criminal background checks conducted by CCS prior to being hired in addition to ACIC/NCIC and CBS criminal background checks.

GEO provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied for work.

ADC DO #125 mandates that criminal background checks be completed on all employees and contractors every five years. In interview with the Human Resource Manager, he reported that when the GEO contract is in effect for five years, at that time all employees and contractors will receive ACIC/NCIC and CBS criminal background checks. He also reported that annually all employees and contractors have a motor vehicle check by CBS and any time an employee is considered for a promotion or transfer. Random review of employee and contractor human resource files revealed that the facility is doing an excellent job of adhering to policy and standard requirements with excellent record keeping and was therefore found to exceed in the requirements of this standard.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

When designing or acquiring any new facility and in planning any substantial modification of existing facilities, ASPC-Kingman will consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Since the last PREA audit, ASPC-Kingman has not acquired any new facility or made expansions or modifications to the existing facility.

When installing or updating a video monitoring system, electronic surveillance system or other monitoring technology, ASPC-Kingman will consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. ADC DO #125, page 15, section 125.06, 1.13.1.5, states that assessment will be made whether monitoring technology should be deployed or augmented to supplement the supervision of inmates by staff.

The Huachuca unit had a major upgrade to their camera system in November of 2016 with the addition of 26 cameras in the inmate housing units along with camera monitoring capabilities in the Deputy Wardens' offices. During that same time, the Cerbat unit had new DVR's installed to improve the recording capabilities of their monitoring system.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? Yes No
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

It is the responsibility of the ADC Criminal Investigation Unit (CIU) to conduct PREA investigations and to ensure that all evidence is collected and preserved according to evidence protocol established by the Department of Justice. If an allegation of sexual abuse is reported, ADC CIU is immediately notified and will report to the facility to conduct an investigation, to include evidence collection. According to DO #125, section 125.01, 1.1, all allegations of sexual abuse shall be investigated according to DO #608, *Criminal Investigations* and DO #601, *Administrative Investigations and Employee Discipline*.

ASPC-Kingman does not house youthful offenders: therefore, sub-section 115.21 (b) does not apply to this facility.

According to ADC DO #608, page 7, section 608.08, 1.2 and Correctional Health Care (CHC) policy B-05, section F of sexual abuse have access to forensic exams. Forensic exams are not performed at the facility. GEO and ASPC-Kingman have an MOU with the Kingman Aide of Abused People (KAAP) that provides inmate victims of sexual abuse with forensic exams. Victims of sexual abuse are referred to KAAP for SANE exams at no cost to the inmate. In the past 12 months, there have been no inmates that required SANE exams.

As requested by the victim, victim advocates are provided by KAAP to accompany and support the victim through the forensic medical examination process. KAAP provides emotional support, crisis intervention, information and referrals at the ASPC-Kingman facility to inmate victims as requested.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

According to DO #125, page 2, section 125.01, 1.1, all allegations of sexual abuse shall be investigated according to DO #608, *Criminal Investigations* and DO #601, *Administrative Investigations and Employee Discipline*.

The CIU when notified of an allegation of sexual abuse or sexual harassment ensures that a *Significant Incident Report (SIR)* is generated. A *GEO PREA Incident Tracking Log* is used to track all incidents that occur at the facility. In the past 12 months, there were 13 investigations conducted by CIU of allegations received at the ASPC-Kingman. There were no allegations that appeared to be criminal requiring referral to the Mohave County District Attorney's Office for prosecution.

The agency's policy regarding referral of allegations for sexual abuse and sexual harassment is available on the GEO website (www.geogroup.com/PREA) and the ADC policy can be found on their website (www.azcorrections.gov) under the Constituent Services section.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No

- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? Yes No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Employees receive training on the ADC's zero-tolerance policy for sexual abuse and sexual harassment at Correctional Officers Training Academy (COTA) for all newly hired correctional staff and non-

correctional staff at New Employee Orientation (NEO). ADC DO #125, pages 17-19, section 125.10 outlines the requirements of this training. The *ADC 2017 PREA Annual Training* curriculum was provided for review. It was found to contain all requirements of ADC DO #125 and subsection 115.31 (a) of this standard. Employees sign an *ADC PREA Training Acknowledgement* form (form 125-3) acknowledging receiving and understanding the training they received.

Annually, all employees are required to complete an online PREA training that includes an online acknowledgement of completion. In the past 12 months, the 727 employees assigned to ASPC-Kingman have received PREA training and since the last audit, 1419 employees have received this training.

In addition to the annual online PREA training, correctional staff receive GEO's *Limits to Cross-Gender Viewing and Searches* training annually in COTA and sign an *ADC PREA Training Acknowledgement* form (form 125-3) acknowledging receipt of this training.

In review of random employee training records, it was confirmed that staff are receiving the mandated training and acknowledging receiving and understanding the training by their signature on the *ADC PREA Training Acknowledgement* form with information of completion of annual training maintained electronically on individual transcripts in Tracorp and LMS.

All staff interviewed acknowledged receiving PREA training as a new hire and annually completing online PREA training. Correctional staff acknowledged receiving and GEO's *Limits to Cross-Gender Viewing and Searches* training annually in COTA. All staff interviewed were knowledgeable of ADC's zero-tolerance policy and of their responsibilities related to the prevention, detection, response and reporting of sexual abuse and sexual harassment allegations.

In interview with the Training Lieutenant and his clerk, he reported that the training year for all training including PREA training is from July 1 – June 30. The facility was found to exceed in the requirements of this standard. The facility is doing an excellent job in ensuring that all staff receive PREA training and that documentation of this training is being maintained by the facility.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? Yes No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ASPC-Kingman ensures that all volunteers and contractors who have contact with inmates are trained on their responsibilities under ADC's sexual abuse and sexual harassment policy and procedures. The level of training that volunteers and contractors receive is based on the services they provide and the level of contact they have with inmates.

The facility has 75 contractors and 56 volunteers. Contractors receive the same classroom training and annual training that employees receive and documentation of this training is maintained electronically. Volunteer training is completed on-line for all volunteers and volunteers sign an acknowledgement form upon completion of this training that they submit to their supervisor. In addition, contracted medical staff receive training from Correct Care Solutions as well as ADC training.

Two volunteers from each the Huachuca and Cerbat units interviewed confirmed completing volunteer training and were knowledgeable of the agency/facility's zero-tolerance policy and of their responsibilities as outlined in the policies. They knew who to report to if an inmate alleged sexual abuse or sexual harassment to them.

Four contractors from the Huachuca Unit and five from the Cerbat Unit were interviewed. Contractors interviewed confirmed attending NEO prior beginning their assignment at ASPC-Kingman and completing online PREA training annually. Review of volunteer and contractor files showed that documentation of PREA training is being maintained by facility.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received such education? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 3, section 1.1 states that every institution will provide inmates with information about sexual assault during orientation. Based on DO #125, page 4, section 1.2 – 1.4, all inmates receive an ADC *Sexual Assault Awareness* pamphlet and receive comprehensive PREA education as part of the institutional orientation process. The *Inmate Orientation Schedule* notes the time during the orientation the *Speaking Up: Discussing Prison Sexual Assault* video with discussion was completed and notes the person that facilitated the discussion on the video. Inmates sign an *Offender Orientation Roster* and completion of PREA education is documented electronically in AIMS. Inmate orientation is held every Friday for new arrivals to the Huachuca Unit and held on the day of arrival for inmates at the Cerbat Unit.

On the day of arrival, all inmates sign an *Inmate Acknowledgement of Receipt of Inmate Handbook and Disciplinary Handbook*. The *Inmate Handbook* and the ADC *Sexual Assault Awareness* pamphlet are available in both English and Spanish. Pages 11 and 12 of the *Inmate Handbook* contains PREA information. In review of random inmate training files, documentation provided and verification of inmate PREA training in AIMS, all inmates assigned to the ASPC-Kingman facility are receiving PREA education.

Information provided is to be in formats accessible to all inmates, including those who are limited English proficient, deaf, hard of hearing, blind, visually impaired or otherwise disabled as well as to inmates who have limited reading skills. In addition to information received at intake and the comprehensive education inmates receive in orientation, information is continuously available through posters in each housing unit and in all common areas. All posted and written PREA information is available in English and Spanish.

As discussed in the narrative of standard 115.16, the facility did not have the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD and the contract with Language Line Services had not been initiated; therefore, the facility did not meet compliance to 115.33 (d) of this standard and entered into a corrective action period.

Recommended Corrective Action Plan:

In coordination with the GEO PREA Coordinator and the facility, the facility will need to complete the following steps to achieve compliance to this standard:

1. The Warden would need to send a memo to all staff informing them of bilingual staff at both units and the shifts that they work and advising them of the availability of the language line and how to access the line if bilingual staff are not available for translation.
2. Language line posters in key staff areas need to be posted at both units.

3. Instructions that were provided during the technical assist visit in October 2017 on how to document the use of the language line in AIMS needs to be reissued to staff and staff will need to sign that they have received these instructions.
4. All LEP inmates at both units need to be identified. Once identified, these inmates need to have a PREA retraining to include viewing the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD.
5. After viewing the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD, inmates need to sign the Spanish *Inmate Acknowledgement of Receipt of Inmate Handbook* form. Documentation of this retraining needs to be entered into AIMS with appropriate comments to include the translators name or language line ID number if used.
6. The documentation of the steps 1-5 (list of identified LEP inmates at both units, the Warden's memo on availability of bilingual staff and the Language Line, copy of the Language Line poster, completed Spanish acknowledgement forms and AIMS printouts) need to be forwarded to the PREA Coordinator who will forward the documentation to me for my review.

On 5/1/18, the GEO PREA Coordinator forwarded the requested information the facility provided to prove compliance to this standard. There were 178 Cerbat inmates and 85 Huachuca inmates identified as Spanish speaking only. All identified limited English proficient at both units viewed the Spanish version of the *Speaking Up: Discussing Prison Sexual Assault* DVD (Cerbat on 4/19/18 and Huachuca on 4/30/18). I was provided with the Warden's memo, training rosters with signatures of inmates who attended retraining, copies of all signed Spanish acknowledgement forms for both units and a random sample of AIMS screens showing entries of completion of this retraining noting translator used. Documentation also included a training roster of staff trained on PREA orientation and new arrivals screening procedures.

After review of the documentation provided, the facility was found to meet compliance to all requirements of this standard.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 19, section 125.01, 1.4 states that the Criminal Investigation Unit investigators will receive training in conducting sexual abuse investigations in confinement settings. Investigators receive specialized training in conducting investigations in confinement settings. In interview with the CIU Supervisor, this training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution.

The ADC Criminal Investigation Unit (CIU) investigates all PREA allegations. CIU investigators from across the state receive National Institute of Corrections (NIC) training. The curriculum for the *PREA: Investigating Sexual Abuse in a Confinement Setting* was provided for review. Completion of this training is maintained electronically on the investigator's training transcript and investigators receive a certificate of completion.

When the CIU Investigator Supervisor was interviewed, he acknowledged receiving specialized investigation training and was knowledgeable of his duties in conducting investigations, sexual abuse evidence collection and the evidence required to substantiate a case for administrative action or prosecution referral.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? Yes No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? Yes No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) Yes No NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? Yes No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

All full-time and part-time medical and mental health staff receive specialized training to detect signs of sexual abuse and sexual harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Medical and mental health staff receive specialized training in addition to general training provided to all staff. ADC DO #125, pages 17-19, section 125.10 addresses the requirements of PREA training for employees and contractors of ASPC-Kingman.

GEO's *Specialized Medical and Mental Health* was provided to all 59 health care staff and verification of this training is being maintained electronically. The specialized training curriculum was provided for review and was found to contain all topics required in 115.35 (a).

In interview of health care staff and in review random health care training records, the facility is compliant with the requirements of this standard.

Medical staff do not perform forensic exams. SANE exams are performed at KAAP. Medical and mental health staff interviewed verified receiving specialized training in addition to general PREA training and knew their responsibilities in responding to victims of sexual abuse, proper reporting and how to preserve evidence.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on ADC DO #811, pages 3 & 4, section 1.10, all inmates are assessed during intake and upon transfer to ASPC-Kingman for their risk of being sexually abused by other inmates or sexually abusive towards other inmates. This information is maintained in the Adult Inmate Management System (AIMS). AIMS is an automated computerized system containing information regarding all inmates confined in the Arizona Department of Corrections. This information follows the inmate as long as he is in the custody of ADC.

The screening form in AIMS was reviewed and was found it did not allow the screener to indicate his or her own perception if the inmate appears to be gender non-conforming. This requirement was outlined by the PREA Resource Center in an FAQ dated 10/21/16. All other requirements of the contents of the screening form as outlined in 115.41 (d) are included in the screening form. The facility was found to not meet the requirements of 115.41 (d) of this standard.

The screening considers prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse. Inmates may not be disciplined for refusing to answer any questions or for not disclosing complete information. To maintain confidentiality of this information, Classification, Medical, Program Staff and Supervisory staff have access levels in AIMS that allow them to access screening information. Other staff are not allowed access to this information.

Based on standard requirements of 115.41 (f) and within a set period, not to exceed 30 days of arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. ADC does not require that the facility complete reassessment screenings within 30 days of inmates' arrival to the facility, although ADC's DO #811, page 3, section 1.10.3, states that inmates will be reassessed for risk of victimization or abusiveness no later than 30 days from their arrival at a permanent facility. Based on information provided on ADC's screening procedures, the automated screening system triggers a reassessment anytime there is additional information such as a referral, request or incident of sexual abuse entered into the system. Based on the PREA Resource Center's FAQ of 6/20/14, the facility is required to affirmatively reassess an inmate's risk of victimization or abusiveness within 30 days of intake. The current procedure does not allow an affirmative reassessment; therefore, the facility was found to not meet the requirements of 115.41(f) of this standard.

The requirements of 115.41 (d) require the facility to complete a reassessment anytime there is a referral, request, and incident of sexual abuse or receipt of additional information that bears on the

inmate's risk of sexual victimization or abusiveness. This process is automatically completed in AIMS if new information is entered into AIMS after intake screening that could bear on an inmate's risk of victimization or abusiveness.

Based on my review of the ADC screening procedures, the standard requirements and guidance from the PREA Resource Center and the Department of Justice, the facility was found to not meet compliance to standard 115.41 and entered into a 180-day corrective action period. This auditor is willing to discuss appropriate recommendations of steps to take to bring this standard into compliance with ADC or allow GEO (the contractor) to implement GEO protocols to bring this standard into compliance.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or

security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based ADC DO #811, page 4, section 1.10.5, the facility uses information from the risk screening to make housing, bed, work, education and program assignments to keep inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The AIMS automatically generates points based on the answers provided from the screening questions. A score of 10 points triggers an action alert and the inmate will be referred for a review by a Special Review Team (SRT). This assessment involves three levels of review. First the inmate is reviewed by a Correctional Officer IV (COIV), then the Deputy Warden of the unit and the final review by the Offender Services Bureau (OBS). In review of the screening process and review of AIMS entries while onsite the auditors questioned whether this review process provided an objective review of the inmate, particularly when referred to the Deputy Warden and the OBS.

Guidelines on housing and program assignments and for the management of transgender and intersex inmates are outlined in ADC DO #810. The agency does not place LGBTI inmates in housing units solely based on their sexual orientation. Housing and program decisions for transgender and intersex inmates are considered on a case-by-case basis whether the placement would pose a management or security problem. Transgender and intersex inmates are given the opportunity to shower alone.

Through AIMS, reviews of a transgender or intersex inmate would automatically be triggered. Per ADC DO #810, page 3, section 1.5.2, requires any inmate who identifies as transgender or intersex be interviewed by a Transgender/Intersex Committee within seven days of the inmates arrival to the facility. It was determined that this process is not being completed within seven days of arrival to the facility and not twice a year in accordance with 115.42 (d) and ADC DO #810.

Due to information on the ADC screening procedures reviewed by the auditors while onsite and additional information obtained since the audit, as well as guidance from the PREA Resource Center and DOJ, the facility was found to be non-compliant with the requirements of standard 115.42 and entered into a 180-day corrective action period. This auditor is willing to discuss appropriate recommendation of steps to take to bring this standard into compliance with ADC or allow GEO (the contractor) to implement GEO protocols to bring this standard into compliance.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No

- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?
 Yes No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?
 Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 4, section 125.02, 1.4.1, review of documentation provided and upon interview with the Warden and staff assigned to restrictive housing were used to verify compliance to this standard.

ASPC-Kingman does not place inmates at high risk for victimization in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination has been made that there is no available means of separation from the likely abuser. Inmates placed in segregated housing for this purpose have access to programs, privileges, education and work opportunities to the extent possible. The facility will document and justify any restrictions imposed. Procedures for placing inmates in protective custody and their removal can be found in ADC DO#805.

ASPC-Kingman will assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, not to exceed a period of 30 days. If involuntary segregated housing is needed for longer than 30 days, the facility will review the status of the inmate every 30 days to determine if ongoing involuntary segregated housing is needed.

In interview with the Warden and security staff assigned to CDU, there has not been a time that an inmate was found at high risk of victimization or an inmate who alleged sexual abuse been placed in involuntary segregated housing.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No

- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? Yes No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, pages 7 & 8, section 125.03, 1.4, outlines reporting methods available to inmates to report allegations or suspicions of sexual abuse and sexual harassment. The facility provides multiple ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting allegations and staff neglect or violation of responsibilities that may have contributed to such incidents.

Inmates are made aware through Attachment B of DO #125 that they can call the PREA hotline by dialing 1-9-7732. This information is also stenciled on the walls near the inmate telephones in all housing areas. Calls to this number are answered by the ADC Inspector General Bureau at the ADC's Central Office in Phoenix, AZ. A recording of these calls are sent to ADC's Acting Deputy Director, the Deputy Inspector General, a CIU Supervisor and to the Complex PREA Manager. The CIU Supervisor forwards the calls to the appropriate CIU supervisor for the ASPC-Kingman.

The facility provides inmates with one way for inmates to report abuse or harassment to a public or private entity or office by giving them the address of the ADC Inspector General Bureau on Attachment A, of DO #125, posted in English and Spanish throughout the facility. DO #802, section 802.09, page 7 outlines procedures for the facility to receive and handle grievances related to sexual abuse and sexual harassment and pages 7 & 8 in section 1.3.1 of DO #802 outline procedures for third party reporting.

Inmates at ASPC-Kingman are not detained solely for immigration purposes.

Inmates are informed of methods of reporting available to them in the *Inmate Handbook* (pages 11 & 12) and in an ADC *Sexual Assault Awareness* pamphlet and on posters displayed throughout the facility in both English and Spanish. The agency's policy mandates that staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties and know that they must promptly document any verbal reports.

Inmate interviews revealed that they are aware of the methods of reporting available to them and how to access them.

Staff can privately report sexual abuse and sexual harassment of inmates in writing or by calling the Employee Hotline or telephoning, e-mailing or in writing to the GEO PREA Coordinator. Information on staff reporting is available on the GEO website and in the Employee Handbook and reviewed in the PREA training curriculum. Staff interviewed were knowledgeable of methods of reporting available to them.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)
 Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)
 Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
 Yes No NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

In review of GEO policy 5.1.2-A, pages 19 & 20, section K-2, there is a procedure in place for inmates to submit grievances regarding sexual abuse and the agency has procedures in place for dealing with these grievances. All grievances are handled according to ADC DO #802, section 802.08, pages 6 - 8. There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual

abuse. The agency does not require an inmate to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse.

DO #802.08, page 8, section 1.4, addresses emergency grievances. When an emergency grievance is received alleging that an inmate is at substantial risk of imminent sexual abuse the grievance will be immediately forwarded to the level of review that immediate corrective action can be taken. An initial response is provided to the inmate within 48 hours and the Warden or his designee is required to issue a final decision within five calendar days. The Warden or his designee will document the initial response and the final decision and determine if the inmate is at substantial risk of imminent sexual abuse and what action was taken in response to the emergency grievance. An inmate may be disciplined for filing a grievance related to an alleged sexual abuse if the department can demonstrate that the inmate filed the grievance with malicious intent.

In interview with the Corrections Programs Supervisors at each unit, who are responsible for handling grievances, and in documentation provided for review, in the past 12 months, there have been no grievances related to sexual abuse or sexual harassment filed.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? Yes No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 11, section 125.05, 1.5, outlines the agency's policy on providing inmates with access to outside victim advocates for emotional support services related to sexual abuse. The agency and facility have an MOU with Kingman Aid to Abused People (KAAP) to provide forensic medical exams to inmate victims of sexual abuse. The terms of the MOU also provide victim advocacy services upon the request of the victim and follow-up victim services.

Inmates are given the mailing address to KAAP on a *Victim Advocacy Posting* displayed throughout the facility. Inmates are informed prior to giving them access, of the extent to which communications will be monitored and to the extent to which reports of abuse will be forwarded to authorities. The posted informs inmates that communication to KAAP is treated as legal mail and the legal mail procedures will be followed for confidentiality. ADC DO #914 outlines the facility's procedures for the handling of legal mail.

Inmates are also informed on the *Victim Advocacy Posting* that they can submit a request to their Case Manager or to the PREA Compliance Manager to speak directly to a KAAP advocate. Calls to the advocate are made at no cost to the inmate. DO #915 outlines the facility's procedures for inmate phone calls.

ASPC-Kingman does not house inmates solely for immigration purposes.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Based on ADC DO #125, page 8, section 1.4.1.4, the agency/facility has a method to receive third-party reports of sexual abuse and sexual harassment on behalf of inmates at the ASPC-Kingman facility.

Outside parties can report verbally or in writing to the Criminal Investigations Supervisor of the facility. This information is available on the ADC website at www.azcorrections.gov, under *Constituent Services Information Handbook*. Information for third party reporting and staff reporting is also available on the GEO website at www.geogroup.com/PREA and on posters displayed throughout the facility.

Inmates interviewed were aware of this reporting method. They knew that they could tell a family member or friend who could make a report for them. In the past 12 months, the facility has not received any third-party reports of sexual abuse or sexual harassment.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? Yes No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?
 Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on DO #125, page 3, section 125.01, section 1.4.1 & 1.4.2 and in review of the employee training curriculum, all staff, contractors and volunteers are to report immediately any knowledge or information regarding an incident of sexual abuse or sexual harassment. Any retaliation or suspected retaliation against inmates or staff is also to be reported immediately as well as any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary.

Per ADC DO #125, page 9, section 125.04, medical and mental health practitioners are required to report sexual abuse in accordance with section 125.03 of DO #125, and to inform the inmates of their duty to report and the limitations of confidentiality at the initiation of services.

ASPC-Kingman houses adult male inmates only, none of whom according to their classified level of care are considered vulnerable adults under the Arizona Vulnerable Persons Statue; therefore, sub-section 115.61 (d) is not applicable to this facility.

All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports are reported to the CIU.

Interviews with staff, contractors and volunteers revealed that they are very aware of their reporting responsibilities and know not to reveal any information about sexual abuse incidents to anyone other than to the extent necessary.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. ADC DO #125, page 4, section 125.02, 1.4.1 & 1.4.1.1, outline the procedures related to the agency and facility's efforts to protect inmates who may be at risk for sexual abuse.

In interview with the Warden, there were no times in the past 12 months that it was necessary to take immediate action in regards to an inmate being in substantial risk of sexual abuse. Correctional staff interviewed was aware of their responsibilities if they felt an inmate was at risk for sexual abuse.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? Yes No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 9, section 125.03, 1.6, verify that there is a procedure in place if an allegation is received that an inmate was sexually abused while confined at another facility. The facility is to document the allegation and the Warden, or his designee in his absence, is required to notify the appropriate agency where the abuse was alleged to have occurred as soon as possible, but no later than 72 hours. During interview, the Warden reported that CIU would make this notification and complete a *Significant Information Report (SIR)* documenting that the notification has been made.

If ASPC-Kingman receives a report from another facility regarding alleged sexual abuse occurring at ASPC-Kingman, the allegation will be reported and investigated in accordance with PREA standards.

In interview with the Warden and the Complex PREA Compliance Manager, in the past 12 months, there were four allegations received from inmates that were alleged to have occurred at other facilities. Notifications were made to the Maricopa County Jail, the Pima County Jail, the Cibola Unit and to a Georgia State Prison where the abuse were alleged to have occurred. Documentation of these notifications is being maintained by the Complex PREA Compliance Manager.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?
 Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? Yes No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, pages 4 & 5, section 125.03, 1.1 & 1.2 and interview of staff were used to verify compliance to this standard. Upon learning that an inmate was sexually abused, the first security staff member to respond to the report is required to separate the alleged victim and the abuser, preserve the crime scene, preserve the evidence and not let the alleged victim take any actions that could destroy any physical evidence. They are to immediately notify the on-duty or on-call supervisor and remain on the scene until relieved by responding personnel. If necessary, staff are to initiate an Incident Command System (ICS) as outlined in DO #706.

If the first staff responder is not a security staff member, the responder is required to request the alleged victim not take any actions that could destroy the evidence and notify security staff immediately and remain with the victim until the CIU Investigator arrives. Security and non-security staff first responders are instructed not to reveal any information related to the incident to anyone other than to staff involved with investigating the incident.

All staff carry with them a *First Responder* Card to remind them of the steps to be taken in response to an allegation of sexual abuse. Security and non-security staff interviewed were knowledgeable of the policy and the practice to follow. They reported that they knew that the alleged victim and abuser must be separated and how to preserve the crime scene and the evidence. They reported that they would initiate a Level 5 response from the Incident Command System for the back-up of five other officers for assistance. In the past 12 months, there were no PREA incidents which required implementing first responder duties.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125 in its entirety, verify that there is a plan in place to coordinate actions to be taken in response to an incident of sexual abuse. The facility's Coordinated Response plan is outlined in DO #125 and clearly defines the roles and responsibilities of each person involved, the procedures to be followed in detail and notifications that are required to be made. The PREA Coordinator may be consulted as part of the coordinated response.

The *ASPC-Kingman PREA Coordinated Response Plan* was provided for review. It is the responsibility of the Shift Supervisor, Captain, Unit PREA Manager and the Complex PREA Compliance Manager to ensure compliance to the *PREA Coordinated Response Plan*. An attachment to the response plan, *ADC Sexual Assault Procedures Checklist*, ensures that all steps of the plan are carried out. Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse and sexual harassment.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ASPC-Kingman does not have any collective bargaining agreements. There is nothing that would prohibit removing an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation.

In interview with the Warden and documentation provided for review, in the past 12 months, there have not been any incidents where staff had to be separated from an inmate. At ASPC-Kingman, there is nothing that would prohibit alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation, including termination.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct

and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 Yes No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #811, page 3, section 125.01, 1.4 and DO #811, page 5, section 1.10.6 and in interview with Correctional Programs Supervisors and the Human Resource Manager, responsible for retaliation monitoring, were used to verify compliance to this standard. Inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation from other inmates and staff.

Housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims and emotional support services for inmates who fear retaliation will be protection measures used as per agency and ADC policy.

Monitoring for retaliation for inmates is conducted by the Correctional Programs Supervisor with the first monitoring meeting after 10 days of the report of the allegation and every 30 days following for a minimum of 90 days, or longer if warranted. Monitoring for retaliation is documented electronically in AIMS on the DI20 screen. The facility's obligation to monitor shall terminate if the agency determined that the allegation was unfounded.

Following a report made by another employee of sexual misconduct of a staff member. The Human Resource Manager will monitor the conduct and treatment of the employee who reported the staff misconduct or any staff witnesses who cooperated with the investigation for 90 days or longer if needed.

In the past 12 months, there were no incidents of retaliation that occurred. In interview with the Correctional Programs Supervisors and the Human Resource Manager, they were knowledgeable of the procedure for monitoring for retaliation. In review of AIMS of inmates that alleged sexual abuse, retaliation monitoring is being conducted as required by this standard and ADC policies.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on ADC DO #125, page 4, section 1.4, 1.4.1.1, the agency and facility prohibits inmates who have alleged sexual abuse to be placed in involuntary segregated housing. If segregated housing is used, the same provisions as required in standard 115.43 would apply. ADC DO #804, pages 1 & 2, section 804.01, 1.1.1 & 1.1.1.3 addresses placement of inmates in segregation and DO #805 outlines the procedures for protective custody.

On interview with the Warden and correctional staff assigned to CDU revealed that involuntary segregated housing has not been used for this purpose in the past 12 months.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses? Yes No

- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? Yes No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The facility has policies governing administrative and criminal investigation of sexual abuse. As stated in DO #125, page 1, section 125.01, 1.1, incidents of sexual misconduct are investigated as outlined in DO #608 for incidents involving inmates and DO #601 outlines investigations involving staff. DO #501 , page 2, section 501.01, 1.2.5.2, states there will be prosecution for employees found to engage in sexual contact with inmates.

Subsection 115.71 (a) is not applicable to this facility as the agency does not conduct its own investigations. The facility refers all allegations of sexual abuse and sexual harassment to the ADC Criminal Investigation Unit (CIU). The CIU investigates all PREA allegations. CIU investigators from across the state receive National Institute of Corrections (NIC) training. Completion of this training is maintained electronically on the investigators' Employee Training History.

CIU investigators gather and preserve direct and circumstantial evidence, including any available DNA evidence and any available electronic monitoring data. Investigators conduct interviews of the alleged victim, suspected perpetrators, and witnesses and will review prior complaints and reports of sexual abuse including the suspected perpetrator. The facility cooperates with CIU investigators and remains informed about the progress of the investigation

The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff.

ADC CIU documents investigations in a written report that contains a thorough description of physical, testimonial and documentary evidence. ADC CIU and the facility maintain investigative files according to the ADC Record Retention Schedule. Substantiated allegations of conduct that appears criminal are referred for prosecution. Since the last audit there were no allegations referred for prosecution.

The CIU Supervisor reported during interview that a referral to the Mohave County District Attorney's

Office when probably cause exists that a prosecutable crime was committed. Investigations would continue if an alleged abuser leaves the facility or if an employee leaves employment.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to ADC DO #125, page 14, section 125.06, 1.12.1, the facility shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

ADC CIU conducts all sexual abuse and sexual harassment investigations. When the CIU Supervisor was interviewed and asked what standard of evidence was used in determining if an allegation is substantiated, he confirmed the agency/facility policy.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?
 Yes No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
 Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on DO #608, pages 7 & 8, section 608.08, 1.3 - 1.3.4, the facility ensures that proper notification in writing be given to inmates as to the outcome of the investigation of sexual abuse and sexual harassment allegations if the outcome of the investigation proved to be substantiated, unsubstantiated or unfounded whether the alleged abuser was another inmate or an employee. The CIU Investigator documents the notification in the CIU database.

Following an inmate's allegation that a staff member has committed a sexual offense against the inmate, the CIU will inform the inmate whenever the staff member is no longer posted in the inmate's unit, no longer employed by the facility, indicted on a sexual offense or convicted of a sexual offense.

Following an inmate's allegation of a sexual offense by another inmate the CIU investigator will inform the alleged victim whenever the suspect inmate has been indicted or convicted of the sexual offense. The obligation of the CIU Investigator to notify the inmate victim will terminate if the inmate is released from custody.

In review of investigative files, the CIU investigators document on the investigative summary report that a notification was made. In two files, there was no documentation showing that the alleged victim received a notification. In interview with the CIU Supervisor, he reported that he usually provides in writing through regular mail or verbally and notes this action on the case closure. He checked both of the investigative files in questions and could find any notations that notifications were made. In the future he will notify the alleged victim in writing and maintain documentation this notification was made.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based ADC DO #125, page 2, section 1.2.3 and GEO policy 5.1.2-E, page 11, section L-1, staff shall be subject to disciplinary action up to and including dismissal for violating the agency/facility sexual abuse policies. Dismissal will be the presumptive disciplinary sanction for staff who have engaged in sexual abuse as outlined in DO #601 *Administrative Investigations and Employee Discipline*, and may be referred for criminal prosecution.

DO #125, page 13, section 125.06, 1.7, states that staff, volunteers and contractors will cooperate during an investigation. Failure to cooperate may mean disciplinary action, including dismissal, for the staff member.

Disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment, other than actually engaging in sexual abuse, shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations and resignations for such conduct shall be reported to law enforcement and licensing agencies, unless the activity was clearly not criminal.

Staff are made aware of the zero-tolerance policy and the penalties for violating the policy in the Employee Handbook. In the past 12 months, there was one staff member who violated the GEO and ADC's sexual harassment policies. The allegation was investigated by the CIU and was determined to be substantiated. The case was not referred for prosecution and was referred back to the facility to be handled administratively. The staff member resigned shortly after the incident was reported.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on ADC DO #125, pages 1 & 2, section 125.01, 1.2 addresses sexual misconduct by contractors and volunteers. DO #204 and DO #205 state that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement and relevant licensing bodies, unless the activity was clearly not criminal. DO #204 addresses misconduct by volunteers and DO #205 addresses misconduct by contractors. Involvement of volunteers or contractors in prohibited behaviors will prohibit contact with inmates and a volunteer or contractor who engages in sexual abuse will be reported to the CIU and any relevant licensing bodies. Investigations are conducted in accordance with DO #601, *Administrative Investigations and Employee Discipline* and DO #608, *Criminal Investigations*.

In interview with the Warden and documentation provided for review, there were no allegations of sexual abuse or sexual harassment by contractors or volunteers in the past 12 months. The Warden stated during interview that if an allegation of sexual misconduct by a volunteer or contractor is reported, the person would not be allowed back on the facility until the completion of the investigation and only if the allegation is found to be unsubstantiated or unfounded.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) Yes No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

As per ADC DO #125, page 2, section 125.01, 1.3, inmates found guilty of engaging in sexual abuse involving other inmates shall be subject to formal disciplinary sanctions. Sexual contact, consensual or nonconsensual, between inmates is prohibited. An inmate who sexually assaults another inmate is subject to disciplinary action as outlined in DO #803, *Inmate Disciplinary Process*. The disciplinary action imposed will be treated as a major violation and the inmate will be classified to the highest custody level in accordance with DO #801, *Inmate Classification* and may be criminally prosecuted. Inmates who knowingly make false accusations of sexual assault will also receive disciplinary action as outlined in DO #803.

Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the individual's disciplinary history, and the sanctions imposed for comparable offenses by other individuals with similar histories. Sexual activity between inmates is not considered sexual abuse unless it is determined that the activity was coerced.

The disciplinary process shall consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed.

Disciplining an inmate for engaging sexual activity with an employee is prohibited unless the employee did not consent to the contact. DO #803, pages 14 & 15, section 803.08, 1.1-1.7 outline the penalties for sexual misconduct by inmates. DO #125, page 11, section 125.05, section 1.4 states that mental health services will be offered to all inmate-on-inmate abusers within 60 days.

In interview with the Warden and in documentation provided for review, in the past 12 months there have been no inmates subject to disciplinary sanctions due to inmate-on-inmate sexual abuse.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

DO#125, page 11, section 125.05, outline the requirements of referrals to mental health from initial intake screenings. If during the intake assessment it is determined that an inmate is at risk for sexual victimization or abusiveness the inmate will be referred to mental health for further evaluation. Any inmate who have experienced prior sexual victimization, whether in an institution setting or in the community or any inmate who has perpetrated sexual abuse in an institution setting or the community will be offered a follow-up meeting with a medical or mental health practitioner within 14 days of the initial intake screening.

Information related to sexual victimization or abusiveness in an institutional setting is limited only to medical and mental health practitioners and others that required this information for security and

management decisions. Medical and mental health staff obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

In interview with the Psychologist/Regional Mental Health Manager for Private Prisons Division and the Mental Health Clinician, the process of referral of inmates to be seen by mental health from initial intake screenings is in place.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
 Yes No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?
 Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Inmate victims of sexual abuse will receive timely and unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgement. ADC DO#125, page 5, section 125.03, 1.3.3, states that the facility will ensure that inmate victims of sexual abuse be immediately escorted to the Health Unit for examination, treatment and evaluation. If it is determined by the Health Services staff the inmate victim of sexual abuse will be escorted to the local emergency room facility for further medical treatment or off site for a forensic exam. In interview with the Health Services Administrator, she confirmed this practice.

SANE exams are not performed by medical staff at the facility. Inmate victims of sexual abuse will be performed at Kingman Aid to Abused People. Victims will be offered information about sexually transmitted infections prophylaxis where medically appropriate. All services are provided without cost to the victim regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Refusals of medical services will be documented.

In interview with the Psychologist/Regional Mental Health Manager for Private Prisons Division she shared that sexual abuse victims are always seen within 24 hours of incident by the Mental Health Clinician or by her if after hours and weekends. Medical always responds when an ICS is initiated and mental health is notified of the incident immediately. The abuser is treated like the victim and seen within 24 hours and offered a follow-up visit within 14 days.

In the past 12 months, there has been no access to emergency medical and mental health services required due to an incident of sexual abuse.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

ADC DO #125, page 10, section 125.04, 1.2, and in interview with the Mental Health Clinician and the Health Service Administrator, inmates who reported sexual abuse were used to verify compliance to this standard. The facility offers medical and mental health evaluation and treatment to all inmates who are victimized by sexual abuse while assigned to ASPC-Kingman. Inmate victims of sexual abuse are offered follow-up services, treatment plans, tests for sexually transmitted infections and referrals for continued care following transfer or release if needed. The services offered to victims of sexual abuse are provided without financial cost to the victim and are consistent with the community level of care. Treatment services are provided whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Inmate-on-inmate abusers are referred for a follow-up visit with a mental health practitioner within 60 days of learning of the abuse as stated in ADC DO 125, page 11, section 125.05, 1.4. Any refusals of medical or mental health services are documented.

Sub-sections 115.83 (d) and 115.83 (e) are not applicable to this facility as ASPC-Kingman is an all-male facility.

A Mental Health Evaluation is done on both alleged victims and alleged perpetrators at the time the incident is reported. Victims of sexual abuse or sexual harassment are offered mental health services and referrals for long-term continuity of care and treatment upon release from the facility and documented in the inmate's medical record.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No

- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Review of ADC DO#125, pages 14 & 15, section 125.06, 1.13., review of the *Sexual Abuse Incident Review* form and on interview with members of the Incident Review Team, were used to verify compliance to this standard. The facility conducts a sexual abuse incident review within 30 days of the conclusion of every sexual abuse investigation in which the allegation was determined to be substantiated or unsubstantiated.

The Warden, Deputy Warden, Associate Deputy Warden/PREA Compliance Manager, Chief of Security, HSA, Complex PREA Compliance Manager and the CPS make up the Incident Review Team. A *Sexual Abuse Incident Review* form (form #125-2) is used to document the incident review and upon completion is forwarded to the Warden for his review and signature and to the Complex PREA Compliance Manager who forwards the form to the Inspector General and the GEO PREA Coordinator. The review team considers whether there needs to be any changes to policies or practices to better prevent sexual abuse. They consider whether the incident was motivated by race, ethnicity or gender identity. They examine the area where the incident was alleged to have occurred for physical barriers, adequacy of staffing levels in the area during different shifts and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

The Incident Review Team makes recommendations based on their review of the incident and the facility shall implement the recommendations for improvement, if any, or shall document its reasons for not doing so.

The Complex PREA Compliance Manager reported during interview that the reviews are conducted after the weekly Warden's meeting and the members of the Incident Review Teams from both units are

present for the meetings. In review of investigative files, sexual abuse incident reviews are being conducted and are filed in the corresponding investigative files.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? Yes No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? Yes No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

GEO collects data related to sexual abuse and this data is aggregated at least annually according to GEO policy 5.1.2-A, page 27, section O-1. The data collected includes, at a minimum, the data necessary to answer all questions on the recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics. The facility provides such data from the previous calendar year to the Department of Justice no later than June 30, upon request.

It is the responsibility of the PREA Compliance Manager to compile data collected on sexual activity, sexual harassment and sexual abuse incidents and forward this information to the PREA Coordinator on a monthly basis using the *Monthly PREA Incident Tracking Log* (attachment D of policy 5.1.2-A) as well as *PREA Incident Report Survey* forms for all reported allegations. DO #125, page 16 & 17, section 125.08 states that the Inspector General semi-annually provides written reports to the Director and Deputy Director outlining incidents of sexual assaults, whether by staff or inmates.

The Arizona Department of Corrections 2016 Annual PREA Report and GEO's 2016 Annual PREA Report were provided for review. The reports are made public annually on GEO's website (www.geogroup.com/PREA) and on ADC's website www.azcorrections.gov.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to GEO policy 5.1.2-A, pages 27 & 28, section O-2, GEO reviews all data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training. The agency does this by identifying program areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. DO #125, page 16 & 17, section 125.08 states that the Inspector General semi-annually provides written reports to the Director and Deputy Director outlining incidents of sexual assaults, whether by staff or inmates.

The PREA Coordinator prepares an annual report which includes corrective actions taken for each GEO facility. The annual report includes a comparison of the current year's data and corrective action with those from prior years to provide an assessment of GEO's progress in addressing sexual abuse. The GEO PREA Coordinator forwards the annual report to the Vice President of Operations for his signature and approval. The report is made public annually on GEO's website www.geogroup.com/PREA (Social Responsibility Section). Before making aggregated sexual abuse data public, all personal identifiers are redacted. The Annual PREA Report provides an excellent overview of the agency's efforts in the prevention of sexual abuse and sexual harassment in its facilities; therefore, exceeding in the requirements of this standard.

The Arizona Department of Corrections also prepares an annual report of sexual abuse statistics for their facilities. That report is available to the public on the Arizona Department of Corrections website at www.azcorrections.gov.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to ADC DO #125, page 12, section 125.06, 1.3, 1.3.3, the Inspector General retains all written reports of sexual assault investigations in accordance with DO #103, *Correspondence/Records Control* and ensures that data collected pursuant to standard 115.87 is securely retained for at least 10 years or longer if required by state statute.

GEO and the Arizona Department of Corrections makes all aggregated sexual abuse data from all facilities under their control readily available to the public in an annual report. Before making aggregated sexual abuse data publicly available, all personal identifiers are removed.

The most current annual reports are available on GEO's website (www.geogroup.com/PREA). The Arizona Department of Corrections annual report of sexual abuse statistics for their facilities is available to the public on the Arizona Department of Corrections website at www.azcorrections.gov. The Inspector General retains all written administrative and criminal investigations in accordance with DO #103, *Correspondence/Records Control* in accordance with the Arizona State Library, Archives and Public Records Retention Schedule. Attachment A of DO #201, lists records that are confidential per statute.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.)
 Yes No NA

115.401 (b)

- During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? Yes No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?
 Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
 Yes No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on GEO policy 5.1.2-A, page 28, section P, during the three-year period starting on August 20, 2013 and during each three-year period thereafter, GEO's Contract Compliance Department ensures that each facility operated by GEO is audited at least once by a PREA auditor who has been certified through the Department of Justice. According to the agency's PREA Coordinator, during the three-year period beginning August 20, 2013, GEO ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years.

This audit was conducted by me, a DOJ Certified PREA Auditor in compliance with the PREA National Standards. This audit is the first PREA audit of the facility while under the management of GEO.

I am a DOJ Certified PREA Auditor. During the audit, I was allowed access to all areas of ASPC-Kingman. I was permitted to request and receive copies of any relevant documentation, including information that was stored electronically. I was permitted to conduct private interviews with inmates and staff ensuring confidentiality to our conversations.

Inmates were notified six weeks before the audit on posted facility notices in both English and Spanish that they could send confidential correspondence to me that would be handled like legal mail. The notices provided inmates with my name and mailing address and the limits of confidentiality. I did not receive any correspondence from inmates of ASPC-Kingman.

Prior to the onsite audit visit, I contacted the Kingman Aid to Abused People, an agency that ASPC-Kingman has a Memorandum of Understanding with to conduct forensic exams for inmate victims of sexual abuse and provide victim advocacy and other confidential victim services.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

In compliance with the National PREA Standards, I certify by my signature in the *Auditor's Certification* section of this report (page 90) that no conflict of interest exists with my ability to conduct this audit.

I thoroughly reviewed the Arizona Department of Corrections and GEO policies and procedures. Standards.

For each standard, I made a determination of a finding of Exceeds Standard, Meets Standard or Does Not Meet Standard. See page 14. for a summary of my findings for each of the standards.

This report describes the methodology, sampling sizes and basis for my conclusions as required. I have redacted any personal identifiable inmate or employee information, but I can provide such information to GEO, the Arizona Department of Corrections or the Department of Justice upon request.

Per the Arizona Department of Corrections and GEO policies and standard requirements, the Arizona Department of Corrections and GEO ensures that this final report will be published on their respective websites to be available to the public.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Barbara Jo Denison

November 19, 2018

Auditor Signature

Date